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CURRENT CORRESPOND	Note: A certificate of mailing can only be used for domestic mailings of the Feets) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.							
24737		0 02/07/2007 Cartificata al Mallini en Transmission						
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							(Depositor's name)	
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					******		(Date)	
APPLICATION NO.	APPLICATION NO. FILING DATE		PIRST NAMED INVENTOR		ATTO	DRNEY DOCKET NO.	CONFIRMATION NO.	
10/531,975	04/20/2005		Stein Kniper			NL 021095	5806	
TITLE OF INVENTION	: ZOOM LENS							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE FREV. PAID IS	SOE FEE	TOTAL FEE(S) DUE	DATE DUÉ	
nonprovisional	NO	\$1400	\$300	\$0		\$1700:	05/07/2007	
EXAM	INER	ARTÚNIT	CLASS-SUBCLASS					
LESTER, EVELYN A		2873	359-665000					
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
Address form P1 O/SB/122) attached  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-92 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON 1	THE PATENT (print o	r type)	*************	•••••••••••••••••••••••••••••••••••••••	······································	
PLEASE NOTE: Unl	ess an assignce is ident h in 37 CFR 3.11. Comp	ified below, no assignee pletion of this form is NO	data will appear on the T a substitute for filing	e patent. If an ass	ignee is i	dentified below, the do	cument has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
KONINKLIJKE PHILIPS ELECTRONICS N.V. EINDHOVEN, THE NETEHRLANDS								
Please check the appropri	iate assignee category or	categories (will not be pr	inted on the patent):	☐ Individual 🖾	Corporat	ion or other private grou	p entity Government	
4a. The following fee(s) a	****	Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						
Issue Fee  Publication Fee (N	o small entity discount p	☐ A check is enclosed. ☐ Payment by credit card, Form PTO-2038 is attached.						
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5. Change in Entity Stat	ius (from status indicates s SMALL ENTITY statu					TITY status, See 37 CF		
							assignee or other party in	
			************	***************************************		***************************************	***************************************	
Authorized Signature / PAUL IM/ PAUL IM			Date MAY 7, 2007					
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